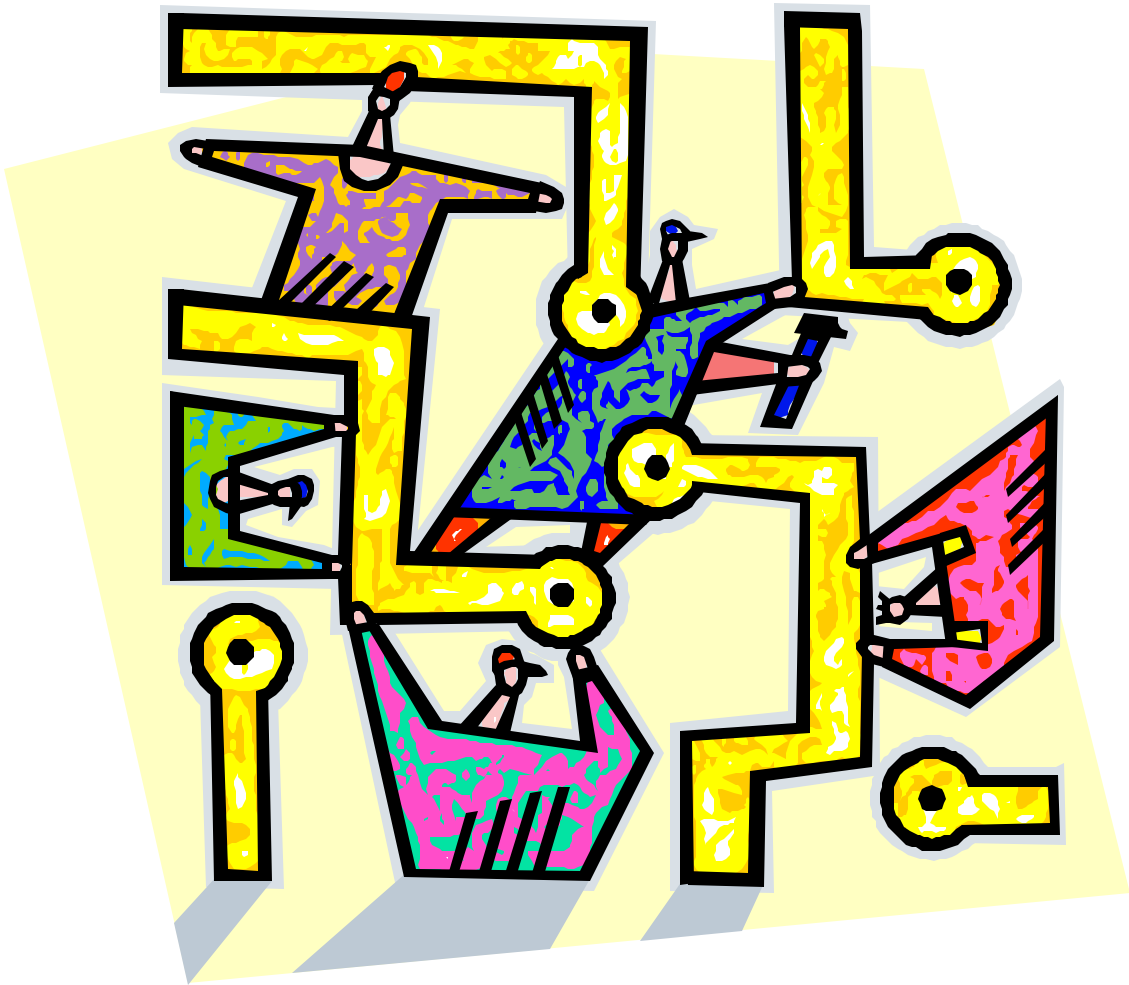


Project Management Framework

Issue Form Template



Project Issue Form

Project Name: _____

Prepared By: _____

Date: _____

A Issue Background

Issue Type (check one):

☐ Request for Information

☐ System Problem

☐ Procedural Problem

☐ Other

Specify

Date Resolution Needed: _____

Proposed Assignee: _____

Attachments (if any):

Reviewer: _____ Reviewer Completion Date: _____

Reviewer Comments:

Issue Description:

Initial Recommendation:

Potential Impact (if not resolved):

Cost / Schedule Impact Analysis Required? ☐ Yes ☐ No

Estimate of Additional Effort:

Resources Required	Work Days/Costs

B Recommendation

Final Recommendation and Comments:

Name/Title	Signature	Date
(Project Manager)		

C Management Action

Recommendation status (check one):

☐ Accept ☐ Defer ☐ Need Additional Information ☐ Reject

Assigned to: _____ Organization: _____

Planned Completion Date: _____

D Signatures

The signatures of the people below relay an understanding in the purpose and content of this document by those signing it.

Name/Title	Signature	Date